EVALUATION YOUNG ADULT SUMMER READING PROGRAM 2009

Please fill out the following form when your young adult summer program is completed.

Return it to: Sally Snyder

Nebraska Library Commission

1200 N Street, Suite 120 Lincoln, NE 68508-2023

| Library: |
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| Dates of your young adult summer program: |
| How often did you meet? |
| How many young adults attended? males females |
| Please describe special programs, materials or services that you offered for young adults: |
| |
| |
| What outcomes of your efforts for young adults did you observe or hear about? |
| |
| Was the Young Adult manual helpful to you? |
| Please specify the sections you used: |
| Did you order young adult materials from the order blank? |
| Did you have a young adult summer reading program last year? |
| Will you plan a young adult summer reading program for next year? |